PTO/SB/06 (08-03)
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	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application for Docket Number 90		
	CLAIMS AS FILED – PART I (Column 1) (Column 2)						SMALL	ENTITY	OR		R THAN ENTITY
		FOR	NUMB	NUMBER FILED		JMBER EXTRA	RATE	FEE	]	RATE	FEE
		SIC FEE CFR 1.16(a))			<del></del>			s	OR		s
		AL CLAIMS CFR 1.16(c))	17	minus 20 =			x \$=		OR	x s=	
		EPENDENT CLAI CFR 1.16(b))	MS /	minus	3 = •		x \$=		OR	× s=	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+s =		OR	+s =	
	* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL		OR	TOTAL	-
	CLAIMS AS AMENDED – PART II								•		
	(Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR		R THAN ENTITY
13/06	ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT   LY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	DME	Total (37 CFR 1.16(c))	20	Minus	" <i>A</i>		=		OR	x \$=	
	AMENDMENT	Independent (37 CFR 1.16(b))	. 4	Minus	***	3 7	x \$=		OR	× s 200	2000
1		FIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (3	7 CFR 1.16(d))	+ \$=		OR	+\$ /=/	
							TOTAL ADD'L FEE		ØR)_	TOTAL ADD'L E	200
	(Column 1) (Column 2) (Column 3)								10	tteto	
	IENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA	RATE	ADDI- / TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=		OR	x \$=	
		Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	× s =	
	AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+s =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(Column 1) (Column 2) (Column 3)									1	
	AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
		Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=		OR	x \$=	
		Independent (37 CFR 1.15(b))	*	Minus	***	=	x \$=		OR	x \$=	
	AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =		OR	+ \$=	
Ī							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
j	•	* If the "Highest I	Number Previously	Paid For	IN THIS SPA	write "0" in column 3 CE is less than 20, e	enter "20".				
	**	If the "Highest N The "Highest Ni	Number Previously umber Previously F	Paid For	IN THIS SPA	CE is less than 3, en	ter "3". It number found in	the appropriat	e hoy in c	olumo 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.